24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Ending Spending Action Fund	
	C C00489856
Check if 24-hour report X 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
American Media & Advocacy Group	M M / D D / Y Y Y Y
Mailing Address 815 Slaters Lane	08 25 2014 Amount
City State Zip Code	17012.00
Alexandria VA 22314	Transaction ID : SE.5585 Date of Disbursement or Obligation
Purpose of Expenditure media placement Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Mary Michelle Nunn Oppose	President State: GA
Calendar Year-To-Date Per Election for Office Sought 1357142.25 Disbr 2014	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
CD, Inc.	M = M / D = D / Y = Y = Y
Mailing Address P. O. Box 1877	08 25 2014
F. O. BOX 1677	Amount
City State Zip Code	21000.00
Alexandria VA 22313	Transaction ID : SE.5586
Purpose of Expenditure Category/	Date of Disbursement or Obligation
online advertising Type	08 04 2014
Name of Federal Candidate Support Offic	e Sought: House District:
Mary Michelle Nunn Oppose	President Senate State: GA
	ursement For: Primary X General
Per Election for Office Sought 1171454.13	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	38012.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(c) TOTAL independent Experialities	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Nancy H. Watkins	- M / D - D / Y - Y - Y - Y
[Electronically Filed] Date Signature	08 25 2014

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Ending Spending Action Fund	C C00489856
Check if 24-hour report X 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
DDC Advocacy	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 174 Waterfront Street, Suite 500	Amount
City State Zip Code	47003.96
National Harbor MD 20745	Transaction ID : SE.5584 Date of Disbursement or Obligation
Purpose of Expenditure online advertising Category/ Type	08 25 2014
Name of Federal Candidate Support Office	Sought: House District:
Mary Michelle Nunn	President State: GA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rrsement For: Primary ⊠ General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Ma Trans Address	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	orsement For: Primary General Other (specify) ▶
, ,	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	47003.96
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	85015.96
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Nancy H. Watkins [Electronically Filed] Date	
- 0	